## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

098448918

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                     |            |                                 |                  |          | SMALL ENTITY TYPE   |                        |           | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|--|---|---------------------|------------|---------------------------------|------------------|----------|---------------------|------------------------|-----------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 06                  |            |                                 | i<br>I           |          | RATE                | FEE                    | [         | RATE                          | FEE                    |  |
| FOR   |  |   | NUMBER FILED        |            | NUMBER EXTRA                    |                  |          | BASIC FEE           | 355.00                 | OR        | BASIC FEE                     | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | <i>U6</i> minus 20= |            | . 26                            |                  |          | X\$ 9=              |                        | OR        | X\$18=                        | 468                    |  |
| INDEPENDENT CLAIMS  |  |   | 5 minus 3 =         |            | 2                               |                  |          | X40=                |                        | OR        | X80=                          | 160                    |  |
| MULTIPLE DEPENDENT CLAIM P  |  |   | RESENT              |            |                                 |                  |          | +135=               |                        | OR        | +270=                         | 100                    |  |
| * If the difference in column 1 is less than zero, enter  |  |   |                     |            | r "0" in c                      | olumn 2          |          | TOTAL               |                        | OR        | TOTAL                         | 1396                   |  |
| CLAIMS AS AMENDED - PART II   |  |   |                     |            |                                 |                  |          | SMALL E             | NTITY                  | OR        | OTHER                         | THAN                   |  |
|   |  | (Column 1)<br>CLAIMS                      |                     | (Colu      | mn 2)<br>(EST                   | (Column 3)       | ۱,       | SMALL               | ADDI-                  |           |                               | ADDI-                  |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                     | PREV       | IBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA |          | RATE                | TIONAL<br>FEE          |           | RATE                          | TIONAL<br>FEE          |  |
|   | Total  | · 47                                      | Minus               |            | 16                              | =                | 1        | X\$ 9=              |                        | OR        | X\$18=                        |                        |  |
|   | Independent                                    | • 6                                       | Minus               | ***        | 5                               | =                |          | X40=                |                        | QB-       | X80=                          |                        |  |
| Ľ   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEP         | ENDEN      | T CLAIM                         |                  | ן נ      | +135=               |                        | OR        | +270=                         |                        |  |
|   |  |   |                     |            |                                 |                  |          | TOTAL               |                        |           | TOTAL                         |                        |  |
|   |  |   |                     |            |                                 |                  |          |                     |                        | OR        | ADDIT. FEE                    |                        |  |
|   |  | (Column 1)<br>CLAIMS                      | 1                   |            | imn 2)<br>HEST                  | (Column 3        | <u> </u> |                     | ADDI-                  | 1         |                               | ADDI-                  |  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |                     | PREV       | MBER<br>IOUSLY<br>FOR           | PRESENT<br>EXTRA |          | RATE                | TIONAL<br>FEE          |           | RATE                          | TIONAL<br>FEE          |  |
|   | Total  | •   | Minus               | ••         |                                 | =                |          | X\$ 9=              |                        | OR        | X\$18=                        |                        |  |
|   | Independent                                    | •   | Minus               | ***        |                                 | =                |          | X40=                |                        | OR        | X80=                          |                        |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                     |            |                                 |                  |          |                     |                        |           | 070                           |                        |  |
| BEST AVAILABLE COPY   |  |   |                     |            |                                 |                  |          | +135=               |                        | OR        | +270=                         |                        |  |
| DEDI MAMILADEL OOT  |  |   |                     |            |                                 |                  |          | TOTAL<br>ADDIT. FEE |                        | OR        | ADDIT. FE                     |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                     |            |                                 |                  |          |                     |                        |           |                               |                        |  |
| AMENDMENT C   | :  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                     | NU<br>PREV | MEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | •   | Minus               | ••         |                                 | =                |          | X\$ 9=              |                        | OR        | X\$18=                        |                        |  |
|   | Independent                                    | •   | Minus               | •••        |                                 | =                |          | X40=                |                        | OR        | X80=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                     |            |                                 |                  |          | +135=               |                        | 1         |                               | 1                      |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                     |            |                                 |                  |          |                     |                        | OR        | TOTA                          | L                      |  |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in C |  |   |                     |            |                                 |                  |          |                     |                        | ADDIT. FE | :L                            |                        |  |
|   | The "Highest Nur                               | mber Previously F                         | 'aid For" (Total o  | r Indeper  | ndent) is th                    | e highest num    | nber fo  | ound in the ap      | propriate bo           | ox in c   | olumn 1.                      |                        |  |